

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Ph</i>	<i>6814</i>	<i>3/11/85</i>
O.I.P.E. CLASSIFIER	<i>Ph</i>	<i>77</i>	<i>3/12</i>
FORMALITY REVIEW	<i>M.M.</i>	<i>71628</i>	<i>3-17-88</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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